

|   |  |   |            |   |   |   |  |  |
|---|--|---|------------|---|---|---|--|--|
| <b>PATENT APPLICATION FEE DETERMINATION RECORD</b><br>Effective December 29, 1999   |  |   |            |   | Application or Docket Number  |   |  |  |
| <b>CLAIMS AS FILED - PART I</b>   |  |   |            |   | <b>SMALL ENTITY</b><br><b>TYPE</b> <input type="checkbox"/> <b>OTHER THAN</b><br><b>OR</b> <b>SMALL ENTITY</b>  |   |  |  |
| FOR   |  | (Column 1)                                | (Column 2) | <input type="checkbox"/> <b>RATE</b> <input type="checkbox"/> <b>FEES</b><br><input type="checkbox"/> <b>OR</b> <b>345.00</b><br><input type="checkbox"/> <b>OR</b> <b>X\$ 9=</b><br><input type="checkbox"/> <b>OR</b> <b>X39=</b><br><input type="checkbox"/> <b>OR</b> <b>+130=</b><br><input type="checkbox"/> <b>OR</b> <b>TOTAL</b> <b>690.00</b> |   |   |  |  |
| BASIC FEE   |  | NUMBER FILED                              |            |   | NUMBER EXTRA  |   |  |  |
| TOTAL CLAIMS  |  | 15  | minus 20=  | *   | *   |   |  |  |
| INDEPENDENT CLAIMS  |  | 2   | minus 3 =  | *   | *   |   |  |  |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |            |   | *   |   |  |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |  |   |            |   | *   |   |  |  |
| <b>CLAIMS AS AMENDED - PART II</b>  |  |   |            |   | <b>SMALL ENTITY</b><br><b>TYPE</b> <input type="checkbox"/> <b>OTHER THAN</b><br><b>OR</b> <b>SMALL ENTITY</b>  |   |  |  |
| AMENDMENT A   |  | (Column 1)                                | (Column 2) | (Column 3)  | <input type="checkbox"/> <b>RATE</b> <input type="checkbox"/> <b>ADDITIONAL</b><br><input type="checkbox"/> <b>OR</b> <b>FEES</b><br><input type="checkbox"/> <b>OR</b> <b>X\$ 9=</b><br><input type="checkbox"/> <b>OR</b> <b>X39=</b><br><input type="checkbox"/> <b>OR</b> <b>+130=</b><br><input type="checkbox"/> <b>OR</b> <b>TOTAL</b> <b>ADDITIONAL</b><br><input type="checkbox"/> <b>ADDITIONAL</b> <b>FEES</b> |   |  |  |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | (Column 1) | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR   | PRESENT<br>EXTRA  | * |  |  |
| AMENDMENT A   |  | Total                                     | *          | Minus   | **  | = |  |  |
| AMENDMENT A   |  | Independent                               | *          | Minus   | ***   | = |  |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |   |            |   | *   |   |  |  |
| AMENDMENT B   |  | (Column 1)                                | (Column 2) | (Column 3)  | <input type="checkbox"/> <b>RATE</b> <input type="checkbox"/> <b>ADDITIONAL</b><br><input type="checkbox"/> <b>OR</b> <b>FEES</b><br><input type="checkbox"/> <b>OR</b> <b>X\$ 9=</b><br><input type="checkbox"/> <b>OR</b> <b>X39=</b><br><input type="checkbox"/> <b>OR</b> <b>+130=</b><br><input type="checkbox"/> <b>OR</b> <b>TOTAL</b> <b>ADDITIONAL</b><br><input type="checkbox"/> <b>ADDITIONAL</b> <b>FEES</b> |   |  |  |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | (Column 1) | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR   | PRESENT<br>EXTRA  | * |  |  |
| AMENDMENT B   |  | Total                                     | *          | Minus   | **  | = |  |  |
| AMENDMENT B   |  | Independent                               | *          | Minus   | ***   | = |  |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |   |            |   | *   |   |  |  |
| AMENDMENT C   |  | (Column 1)                                | (Column 2) | (Column 3)  | <input type="checkbox"/> <b>RATE</b> <input type="checkbox"/> <b>ADDITIONAL</b><br><input type="checkbox"/> <b>OR</b> <b>FEES</b><br><input type="checkbox"/> <b>OR</b> <b>X\$ 9=</b><br><input type="checkbox"/> <b>OR</b> <b>X39=</b><br><input type="checkbox"/> <b>OR</b> <b>+130=</b><br><input type="checkbox"/> <b>OR</b> <b>TOTAL</b> <b>ADDITIONAL</b><br><input type="checkbox"/> <b>ADDITIONAL</b> <b>FEES</b> |   |  |  |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | (Column 1) | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR   | PRESENT<br>EXTRA  | * |  |  |
| AMENDMENT C   |  | Total                                     | *          | Minus   | **  | = |  |  |
| AMENDMENT C   |  | Independent                               | *          | Minus   | ***   | = |  |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |   |            |   | *   |   |  |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |  |   |            |   | *   |   |  |  |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."                                       |  |   |            |   | *   |   |  |  |
| *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  |  |   |            |   | *   |   |  |  |
| The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |            |   | *   |   |  |  |